Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

05/18/2010

Steptoe & Johnson LLP 1330 Connecticut Avenue, N.W. Washington, DC 20036



Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name (Signature) (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/765,201	01/28/2004	Deepak Keshav Pai	12492.0274	7631

TITLE OF INVENTION: METHODS FOR FILLING HOLES IN PRINTED WIRING BOARDS

APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE			
L		L	\$300	\$0	\$1810	08/18/2010			
nonprovisional	NO	\$1510	\$300	* =	*				
EXAMINER		ART UNIT	CLASS-SUBCLASS	00/13/501	0 LNGUYEN2 0000005	0 194293 - 1076520			
CHANG, RI	CK KILTAE	3726	029-852000	01 FC:150:	1010.00 14				
1. Change of correspond	lence address or indication	n of "Fee Address" (37	2. For printing on the p	atent front page, list	Steptoe & J	ohnson LLP			
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
_				(2) the name of a single firm (having as a member a					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or typ	œ)					
			data will appear on the part of a substitute for filing an		dentified below, the doc	ument has been filed for			
(A) NAME OF ASSI				and STATE OR COUNT					
General Dynamics	Advanced Information	on Systems, Inc.	Fairfax, VA						
Please check the appropriate 4a. The following fee(s)		······································	b. Payment of Fee(s): (Plea						
Issue Fee	are subtracted.	•	A check is enclosed.	no this comppey many pro-	, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·			
	No small entity discount	permitted)		d. Form PTO-2038 is atta	iched.				
	# of Copies		The Director is hereby overpayment, to Depo	authorized to charge the sit Account Number 19	required fee(s), any defic -4293 (enclose an o	eiency, or credit any extra copy of this form).			
5. Change in Entity Sta	itus (from status indicate	d above)							
a. Applicant clain	ns SMALL ENTITY stat	us. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL EN	ITTY status. See 37 CFR	1.27(g)(2).			
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	d from anyone other than to Office.	he applicant; a registered	attorney or agent; or the	assignee or other party in			
Authorized Signature	Short	Jak		DateAugust 18,	2010	<del></del>			
Typed or printed nam	ne Scott D. Watkins			Registration No3	6,715				
		TED 1 211 The information	on is required to obtain or r	etain a henefit by the publ	lic which is to file (and h	w the USPTO to process			

Inis collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

CURRENT CORRESPON	DENCE ADDRESS (Note: Use B	ock 1 for any change of address)		recis	i) i ransmittati i his	cemil	icale cannol he used l	r domestic mailings of th or any other accompanyin nt or formal drawing, mus
Steptoe & Joh 1330 Connectic Washington, DO	1 8 2010 4	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
		\ <u>#</u>						(Depositor's name
		THIS THE	4DEMARTIS					(Signature
	<b>,</b>			<u> </u>				(Date
APPLICATION NO.	FILING DATE	l·	FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/765,201	01/28/2004		Deepak Keshav Pai				12492.0274	7631
APPLN, TYPE	SMALL ENTITY	ING HOLES IN PRINT	PUBLICATION FEE D		PREV. PAID ISSUE	EEE T	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	0.5		ren	<del></del>	DATE DUE
·					\$0		\$1810	08/18/2010
	INER	ART UNIT	CLASS-SUBCLASS				•	
	CK KILTAE	3726	029-852000					
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>□ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			(1) the names of up or agents OR, altern	single firm (having as a member a y or agent) and the names of up to that attorneys or agents. If no name is				
3. ASSIGNEE NAME A								
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI		fied below, no assignee letion of this form is NO						eument has been filed for
•	Advanced Informatio	n Systems Inc	(B) RESIDENCE: (C)		ING STATE OR CC	JUNTE	(Y)	
		•	•		ndividual 🗹 Con	poratio	n or other private gro	up entity Government
4a. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4293 (enclose an extra copy of this form).					
5. Change in Entity Stat	•	•						
	s SMALL ENTITY status d Publication Fee (if requi		b. Applicant is no	longe	r claiming SMALL	ENTI	TY status. See 37 CF	R 1.27(g)(2).
interest as shown by the r	ecords of the United Stat	es Patent and Trademark	Office.	an ene	applicant, a registi	erea all	or the	assignee or other party in
Authorized Signature	Mitt	Jak	<del></del>		DateAugus	st 18, 2	010	
Typed or printed name Scott D. Watkins			Registration No. 36,715					
This collection of informa an application. Confident submitting the completed	ation is required by 37 CF iality is governed by 35 to application form to the	R 1.311. The information J.S.C. 122 and 37 CFR 1 USPFO. Time will vary	n is required to obtain of .14. This collection is depending upon the in-	or reta estim	ain a benefit by the tated to take 12 mi	public nutes to ments	which is to file (and o complete, including on the amount of ten	by the USPTO to process) gathering, preparing, and

 $\overline{\mathbf{n}}$ an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.